Des Moines Area

Healthcare Interpretation Guide

Created by the Refugee Health Alliance

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Interpretation:

The facilitating of oral or sign-language communication between users of different languages.

Translation:

The rendering of the meaning of a written word or text from one language or another.

Did you know?

Title VI of the Civil Rights Act of 1964 prohibits recipients of federal funding from discriminating based on national origin by failing to provide meaningful access to individuals who are limited English proficient (LEP). Recipients of federal funding (i.e. Medicaid) are required to provide interpreter/translation services.

INTERPRETATION AND TRANSLATION AGENCIES

In-person interpretation



Telephone interpretation



Emergency interpretation

Agencies	Services	Costs
Iowa International Center 319 7th St. Suite 200, Des Moines, IA 50309 Ph: 515-282-8269 Fax: 515-282-0454 translation@iowainternationalcenter.org	Translation in written, and interpretation at the site of appointment (20 miles radius from Des Moines) or via phone (use ext. 16).	Written Request Quote; Oral: Hourly interpretation \$55- \$70 based on language. Travel charges apply for outside of Des Moines area.
LANGUAGEtech, Inc. PO Box 41190 Des Moines, IA 50311 Ph: 515-277-6058 Email: <u>interpreting@langtechinc.com</u>	In-person interpretation	Tailored to the client's needs. Per-minute in-person rates available, no minimum. Call or e- mail for a quote.
Mercy Interpretation Services 1111 6 th Ave Des Moines, IA 50314 Ph: 515-247-8255 TTY: 515-643-7446 Email: <u>interpreter@mercydesmoines.org</u>	Free medical interpretation services and assistive communication equipment.	Free to any Mercy patient, family member or employee upon request.
Broadlawns Medical Center Interpreting & Translation Services 1801 Hickman Rd Des Moines, IA 50314 PH: 515-282-3366 TTY 515-282-4290) Email: <u>clam@broadlawns.org</u>	On site or via phone interpretation.	Free of charge for all Broadlawns patients.
EMBARC Interpretation ServicesImage: Constraint of the service of t	Offer live interpreting services (on site or via phone), and translation services	Written Request Quote; Oral: Hourly interpretation \$50- \$60 based on organization. Travel charges apply for outside of Des Moines area

International Translation Services, Inc. Phone: 515-897-7628 Fax: 630-566-1174 Website: www.intts.com Email: ITS@translatorsiowa.com	Interpreting services (in-person and over the phone) in over 50 languages, translation, transcription, proofreading and editing services, videoconference Interpreting, cultural adaptation trainings.	Charges range for different languages \$45-\$65 per hour. Written quote request required. Travel charges apply to outside of Des Moines-West Des Moines area.
Voices Interpreting, LLCDarcy Lopez, President7528B Hickman RoadWindsor Heights, IowaOffice: 515-612-6011Email:d.lopez@voicesinterpreting.com	Translation and interpreting services available.	Please contact for rates.
Language Lines Available:Image: SelectLanguage SelectImage: SelectOptimal Phone InterpretersImage: SelectPacific InternationalImage: SelectCertified LanguageImage: SelectThe Big WordImage: Select	In addition to over-the phone interpretation, most of these companies also offer video interpreting and translation services.	Call for current services and rates (as they are subject to change).
Community Voices Visiting Nurse Services of Iowa 1111 9th Street, Suite 320 Des Moines, IA 50314 Ph: 515-558-9597 Email: <u>info@communityvoicesiowa.org</u>	On-site and phone interpretation in more than 25 languages; Document translation available upon request; bids given on a per-project basis	Interpretation starts at \$50/hour; one hour minimum Vendor service agreement required
BLIS Communications Zijo Suceska Ph: 515-250-4441 E-mail: <u>z@bliscom.com</u> www.bliscom.com	In-person interpreting; Over- the-phone and emergency interpretation for Bosnian/Serbo-Croation only.	Please contact for current rates.

BEST PRACTICES FOR COMMUNICATING THROUGH AN INTERPRETER

Who Can Serve as a Health Care Interpreter?

Bilingual staff and volunteers trained as health care interpreters, on-staff interpreters, contract interpreters and telephone interpreters can serve as health care interpreters.

The following people should **NOT** serve as health care interpreters: **<u>patients'</u>** family and friends</u>, children under 18 years old, other patients or visitors and untrained volunteers.

For Providers | How to work effectively with an interpreter:

- If possible, ask for an interpreter of the same gender the patient may feel more comfortable.
- Introduce yourself to the interpreter. Determine the interpreter's level of English proficiency and request that the interpreter interpret in the first person.
- During the medical interview, **speak directly to the patient**, not to the interpreter.
- Allow time for a pre-session with the interpreter. When working with Limited English Proficiency patients, a pre-session can be very helpful to both the provider and the interpreter.
- **Speak more slowly** rather than more loudly.
- Speak at an even pace in relatively short segments. Pause so the interpreter can interpret.
- Assume, and insist, that **everything** you say, everything the patient says, and everything that family members say **is interpreted**.
- **Do not hold the interpreter responsible for what the patient says or doesn't say.** The interpreter is the medium, not the source of the message.
- Be aware that many concepts you express have no linguistic or conceptual equivalent in other languages. The interpreter may have to paint word pictures of many terms you use. This may take longer than your original speech.
- Give the interpreter time to restructure information in his/her mind and present it in a culturally and linguistically appropriate manner. Speaking English does not mean thinking in English.
- Remember that your patient may have been a victim of torture or trauma. This may also be true for the interpreter. If you need to ask questions that may be **personal or sensitive**, explain to the patient that doing so is part of your evaluation and reiterate that the information will remain confidential.
- Avoid: Highly idiomatic speech, complicated sentence structure, sentence fragments, changing your idea in the middle of a sentence, and asking multiple questions at one time. Also, avoid making assumptions or generalizations about your patient, their experiences or their community.
- Avoid patronizing or infantilizing the patient.
- Ask the patient **what he/she believes the problem may be**, what causes it, and how it would be treated in their country of origin.
- Ask the patient to **repeat back** important information that you want to make sure is understood.
- **Be patient.** Providing care across a language barrier takes time.
- If you have any concerns or questions about the interpretation, don't hesitate to ask the interpreter.

When is face-to-face interpreting preferable to telephone interpreting?

• When mental health services are being provided:

Telephone interpreting should never be used in mental health setting. Not only that telephone interpreting might confuse the patient, it can also present a hazard since the telephone equipment can be used as a weapon.

• When serving patients who are hard of hearing:

Elderly and hard of hearing patients rely on lip reading; in these instances it is preferable to have a face-to-face interpreter.

• When communicating with children:

Since children often have difficulties communicating over the phone it is preferable to have a face-to-face interpreter.

• When providing patient education with visual components:

For medical appointments during which the provider is giving instructions to the patient (e.g. wound care, physical therapy, blood sugar testing, teaching aids or equipment are used). When this happens, it is preferable to have a face-to-face interpreter since over-the- phone will not be able to see what is being demonstrated.

• When there are multiple individuals present with limited English proficiency

Telephone interpreting is not a practical solution when the provider is communicating to multiple patients at the same time (e.g. health education class) or when multiple individuals are present (e.g. a patients and several family members).

When is telephone interpreting preferable to face-to-face interpreting?

• When both parties (patient and provider) are already communicating via telephone:

When patients call appointment lines, nurse advice lines, triage lines, and other numbers for service over the phone, telephone interpreting is the best option.

With the rise of telemedicine and a variety of services being provided over the telephone, these situations are increasingly common.

• When trained interpreters are not available in person:

In the situations when trained interpreters are not available in person instead of using a patient's family member, friend or an untrained bilingual staff member it is always preferable to use an interpreter over the phone.

When it is preferable to not have another person in the room.

Due to the patient's cultural, religious, and individual preferences it is worth considering that the anonymity of a telephone interpreter can be an advantage at times, especially where modesty might be a consideration (e.g. discussing sexual health issues, domestic abuse, family violence, sensitive memories).

RESOURCES

The Iowa Refugee Health Alliance - a group of over 40 refugee-serving partners and providers working to increase access to healthcare services for refugees in Iowa.

Current Chairs: Brianne Sanchez (<u>brianne.sanchez@dmu.edu</u>) and Jessica Eagan (<u>jessica.eagan@idph.iowa.gov</u>)

Refugee Health Technical Assistance Center

Website: <u>http://refugeehealthta.org/</u> Link: <u>http://refugeehealthta.org/access-to-care/language-access/best-practices-communicating-</u> <u>through-an-interpreter/</u>

American Translators Association

https://www.atanet.org/chronicle/feature article june2007.php

TRAINING

Online Training for Doctors on Working with Interpreters

This web-based program, developed by Cindy Roat and Dr. Elizabeth Jacobs, confers up to 2.5 continuing medical education credits through Rush Medical College. It uses video and case studies to train doctors on: how to work with professional interpreters; how to guide an untrained interpreter; how to work with a telephonic interpreter; how to work with interpreters in mental health settings; and how to start to develop a language access program internal to a hospital or clinic. For more information, contact Bob Amend at (520) 722-1970 or <u>bamend@md-inc.com</u>.

Getting the Most from Language Interpreters

www.aafp.org/fpm/20040600/37gett.html

This article by Emily Herndon and Linda Joyce from Family Practice Management includes a small section with guidelines for working with telephone interpreters. It is available for download at the above link.